

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **TARGETED ANGIOGENESIS** the specification of which _____ is attached hereto or X was filed on **June 7, 1999** as Application No. **09/327,045** and was amended on _____ (if applicable).

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Country	Application No.	Date of Filing	Priority Claimed Under 35 USC 119

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date

I claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Date of Filing	Status

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Randolph T. Apple, Reg. No. 36,429
Debra D. Condino, Reg. No. 31,007
C. Joseph Faraci, Reg. No. 32,350
Peter J. Gluck, Reg. No. 38,022
Janice Guthrie, Reg. No. 35,170

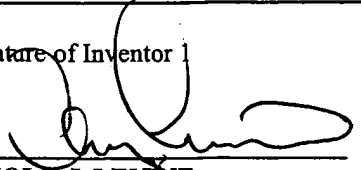
Michael C. Schiffer, Reg. No. 30,215
Andrew T. Serafini, Reg. No. 41,303
William M. Smith, Reg. No. 30,223
Leni I. Vinitskaya, Reg. No. 39,448

Send Correspondence to:
Andrew T. Serafini, Ph.D.
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Direct Telephone Calls to:
(Name, Reg. No., Telephone No.)
Name: **Andrew T. Serafini, Ph.D.**
Reg. No.: **41,303**
Telephone: **650-326-2400**

Full Name of Inventor 1:	Last Name: Levine	First Name: Arnold	Middle Name or Initial: J.	
Residence & Citizenship:	City: New York	State/Foreign Country: New York	Country of Citizenship: U.S.A.	
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Full Name of Inventor 2:	Last Name: Mitterer	First Name: Artur	Middle Name or Initial:	
Residence & Citizenship:	City: Orth, Donau	State/Foreign Country: Austria	Country of Citizenship: Austria	
Post Office Address:	Post Office Address: Schwarzeckerweg 10	City: Orth, Donau	State/Country: Austria	Postal Code: A-2304
Full Name of Inventor 3:	Last Name: Falkner	First Name: Falko-Guenter	Middle Name or Initial:	
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Full Name of Inventor 4:	Last Name: Scheiflinger	First Name: Friedrich	Middle Name or Initial:	
Residence & Citizenship:	City: Vienna	State/Foreign Country: Austria	Country of Citizenship: Austria	
Post Office Address:	Post Office Address: Michelbeuerngasse 4/17	City: Vienna	State/Country: Austria	Postal Code: A-1090
Full Name of Inventor 5:	Last Name: Dorner	First Name: Friedrich	Middle Name or Initial:	
Residence & Citizenship:	City: Vienna	State/Foreign Country: Austria	Country of Citizenship: Austria	
Post Office Address:	Post Office Address: Peterlinigasse 17	City: Vienna	State/Country: Austria	Postal Code: A-1238

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1  ARNOLD J. LEVINE	Signature of Inventor 2 ARTUR MITTERER	Signature of Inventor 3 FALKO-GUENTER FALKNER
Date October 8, 1999	Date	Date
Signature of Inventor 4 FRIEDRICH SCHEIFLINGER		Signature of Inventor 5 FRIEDRICH DORNER
Date		Date



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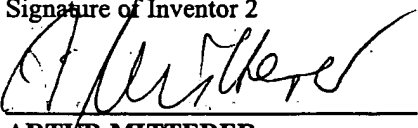
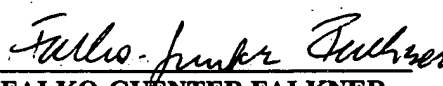
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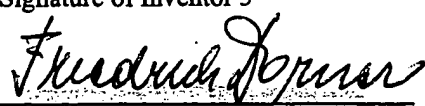
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Residence & Citizenship:	City: New York	State/Foreign Country: New York	Country of Citizenship: U.S.A.	
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Full Name of Inventor 2:	Last Name: Mitterer	First Name: Artur	Middle Name or Initial:	
Residence & Citizenship:	City: Orth, Donau	State/Foreign Country: Austria	Country of Citizenship: Austria	
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Post Office Address:	Post Office Address: Michelbeuerngasse 4/17	City: Vienna	State/Country: Austria	Postal Code: A-1090
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Signature of Inventor 1 ARNOLD J. LEVINE	Signature of Inventor 2  ARTUR MITTERER	Signature of Inventor 3  FALKO-GUENTER FALKNER
Date	Date October 8, 1999	Date October 8, 1999

Signature of Inventor 4  FRIEDRICH SCHEIFLINGER	Signature of Inventor 5  FRIEDRICH DORNER
Date October 8, 1999	Date October 8, 1999